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| **ADVICE QUALITY STANDARD** **Casework Experience and Range**  Form: Case 1 – Housing | C:\Users\shabhav.ADVICE\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\ELAROT0B\AQS_logo_CMYK(150dpi) (3).jpg |

##### This form must be completed if applying for certification to General Help with Casework in the Housing category.

Cases listed to fulfil the criteria must be cases which were active within the last 12 months. Please complete column 3 with either the case reference or file name. Please also state the caseworker responsible for the case if applying through the 12-hour caseworker route (D5.1).

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| **Requirement** | | | **File Ref No / Filename** | **Initials of Caseworker** |
| 1. | Six out of eleven of sections 1.1 to 1.11: | |  |  |
|  | 1.1 | Private disrepair, public disrepair, or EPA – statutory nuisance. |  |  |
|  | 1.2 | Neighbour disputes. |  |  |
|  | 1.3 | Homelessness and re-housing, three out of the four below: |  |  |
|  |  | * 1.3.1 - Statutory (Pt VII / Children Act). |  |  |
|  |  | * 1.3.2 - Allocation. |  |  |
|  |  | * 1.3.3 - Transfer. |  |  |
|  |  | * 1.3.4 - Non-statutory e.g. housing association or private sector. |  |  |
|  | 1.4 | Security of tenure where the status is unclear or can be challenged in either public / housing association (including succession / assignment) or private sector possession / repossession. |  |  |
|  | 1.5 | Rent arrears or rent levels including Rent Officers, Rent Assessment Committees or Rent Tribunals including the implications of different tenures. |  |  |
|  | 1.6 | Housing Benefit or Jobseekers’ Allowance / Income Support for housing costs/ Pension Credit/ESA /Local Housing Allowance/Universal Credit |  |  |
|  | 1.7 | Long leaseholders. |  |  |
|  | 1.8 | Harassment and illegal eviction. |  |  |
|  | 1.9 | Keeping a home or re-housing due to relationship breakdown or domestic violence. |  |  |
|  | 1.10 | Mortgage arrears and preventing repossession. |  |  |
|  | 1.11 | Landlord and Tenant Disputes (including deposit and contract issues) |  |  |

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| **I confirm the above information is accurate.** | |
| **Name (please print):** |  |
| **Signature:** |  |
| **Date:** |  |
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